		•	67 6		.v. w.	-		٠,	N.				
	PATENT A	APPLICATIO Effect	RD	Application or Docket Number 09/19/18/									
· CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			28				RA	RATE			RATE	FEE	
FÖR			NUMBER FILED		NUNBER EXTRA		BASK	BASIC FEE		OR	Basic Fee	710.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20=		. 8		X\$ 9=			OR	X\$18=	iene -	
INDEPENDENT CLAIMS			/ minus 3 =				X40=		<u> </u>		XÂO	<u> 144</u>	
Mil	LTIPLE DEPEN	(DENT CLAIM P	RESENT			——————————————————————————————————————				OR			
A Mathe Afficiance in early man A la least the access and a self-field for a first the self-field for							+13	5 <u>-</u>		OR	+270=		
* If the difference in column 1 is less than zero, enter *0" in column 2							TO	TOTAL		OR	TOTAL	154-	
(Cotumn 1) (Cotumn 2) (Cotumn 3)						(Column 3)	SM		ENTITY	OA	OTHER SMALL		
AMENDMENT A		CLAHAS REMAINING AFTER AMENDMENT	·	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	Æ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
夏	Total	24	Minus	2	8	- /	XS	9=		OR	X\$18=		
	Independent	•	Minus	***	<u> </u>	£	X44	-		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13	5 <u>=</u>	•	OR	+270=	•	
	11 1							ADDIT, FEE		OR ADDIT, FEE			
	7/29/5	1/29/5 (Column 1) (Column 2) (Column 2)											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	· RA	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
₹	Total	21	Minus	2	8	- /	XS	•		OR	X\$18=		
AME	Independent	.2	Minus	1.6	>		X41	_		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+13	5a		OR	+270=		
1 :								TAL		OR	TOTAL		
	4410												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	· 22	Minus	50		#	XS)=		OR	X\$18=		
3	Independent	. 2	Minus			2	X40				X80=		
•	SPOT ODESC	DOT DESCRIPTION OF MUITIPLE DEPENDENT CLAIM						- 1	1	OR			

"If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

+270=

OR ADDIT FEE

+135=